529 College Savings Plan Beneficiary Change Form

Customer Information:

Participant's/Trustee's Name
Participant's/Trustee's Social Security or Tax I.D. Number
Participant's/Trustee's Account Number:
Current Beneficiary's Name
Current Beneficiary's Social Security or Tax I.D. Number (required)

Use this form to change the beneficiary and transfer the account balance from your existing 529 College Investing Plan account to a 529 College Investing Plan account for your new beneficiary.

Once a 529 plan account is established under the Uniform Gifts to Minors Act or Uniform Transfers to Minors Act (UGMA/UTMA), the beneficiary of the UGMA/UTMA 529 plan account cannot be changed.

Return the completed form to Fidelity Investments College Plan Service Center, PO Box 770001, Cincinnati, OH 45277-0015. If you have any questions, call us anytime at 1-800-544-1914 or visit us at Fidelity.com.

1 NEW BENEFICIARY DESIGNATION

If the new beneficiary named in this section is a "member of the family" (as defined in Section 2 below) of the original beneficiary, those balances not in excess of the maximum contribution amount will be moved, federal income tax-free, to another 529 Plan account for your new designated beneficiary. If the new beneficiary is **not** a "member of the family" of the original beneficiary, your change will result in a taxable distribution. Earnings on this distribution will be income taxable at the federal level to the Participant in the year the change is made. A federal penalty tax equal to 10% of earnings will also apply pursuant to Internal Revenue Code ("IRC") Section 529. If the new beneficiary is a member of a younger generation relative to the original beneficiary, the transfer may be subject to federal gift and generation-skipping transfer taxes.

New Beneficiary's Name	New Beneficiary's Date of Birth
New Beleficiary & Marie	New Beneficiary's Date of Britis
New Beneficiary's State of Residence	New Beneficiary's Social Security or Tax I.D. Number (required)
Do you already have an existing account for your new be	eneficiary?
	ress above. I understand that the proceeds from the original beneficiary's ing to its existing allocation instructions unless I indicate a different allo-
	form and your Account Application to the address at the top of this ur contributions (initial and future) in the Investment Selection section
2 RELATIONSHIP BETWEEN BENEFIC	CIARIES
Please describe the relationship between your Origin	nal Beneficiary and your New Beneficiary.
Member of Family Eligible for a Federal Income Tax	x-Free Transfer:
\square a son or daughter or a descendant of either (1)	\square a stepfather or stepmother (5)
\square a stepson or stepdaughter (2)	\square a son or daughter of a brother or sister (6)
\square a brother, sister, stepbrother or stepsister (3)	\square a brother or sister of the father or mother (7)
\square a father or mother or an ancestor of either (4)	Dlages continue
	Please continue ->

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2 RELATIONSHIP BETWEEN BENEFIC	IARIES (CONTINUED)	
Member of Family Eligible for a Federal Income Tax	z-Free Transfer:	
a son-in-law, daughter-in-law, father-in-law, mother		-in-law (8)
\Box the spouse of any individuals described above (1–8)	,	
□ a spouse		
a first cousin		
A legally adopted child is treated as the child of the half-brothers and half-sisters.	adoptive parent as if by blood	l. The terms "brother" and "sister" include
Other Relationship; Subject to Federal Income Tax a	and Penalty Tax on Earnings [Distributed:
Other; Describe Relationship (Optional)	,	
3 INSTRUCTIONS		
Units in your current account will be sold and the p Only that portion of your account balance which do new beneficiary will be transferred. Any amounts wh beneficiary. You will be notified of any remaining ba	es not exceed the maximum a nich cannot be transferred wil	allowable contribution amount for your
☐ Full Account Transfer or ☐ Partial Account Transfe	er (indicate amount)	
If you are requesting a Partial Account Transfer, plea		,
Portfolio Name	Dollar Amount	Full Portfolio Distribution
Torrono Fune	Donar Imount	(Check all that apply)
	\$	
	\$	
	<u>\$</u>	
The proceeds from your current account will be invested instructions on file for the new beneficiary's account, ur Invest the proceeds from the current account into the to the new beneficiary's account will be invested account currents of 5% only and the total must equal 100	nless you check the box and ind e account for the new beneficiar cording to the allocation instruct	licate a different allocation below. y as detailed below. (All future contributions
Choose one option only		
Age-Based Strategy		
100% of your contributions will be invested mutual funds and is designed for the designation		
Age-Based Strategy (Index Series)		
100% of your contributions will be invested and is designed for the designated beneficiar		

3	INSTRUCTIONS (CONTINUED)
	Custom Strategy
	Create your own investment mix from any of the 529 Plan Portfolios below.
	100% Equity Portfolio 70% Equity Portfolio Conservative Portfolio 100% Equity Portfolio (Index Series) 70% Equity Portfolio (Index Series) 70% Equity Portfolio (Index Series) % Conservative Portfolio (Index Series) % Social Choice Portfolio (Index)* % Spartan® 500 Index Total Market Index International Index International Index Money Market Portfolio (Cash Reserves) Total (must equal 100%) ** ** ** ** ** ** ** ** **
	*California plan only
4	AUTHORIZING SIGNATURE
another accourt to indet this without Figure efficiary belong an account and account to the second that we have the second that we have the second that the se	form with a later date. I authorize Fidelity to process this beneficiary change from the College Investing Plan indicated in this instruction. I authorize you to sell units in my current account and transfer the proceeds to an for my new beneficiary. The undersigned agrees that the statements made herein are true and correct and agrees mify and to hold Fidelity harmless for any loss suffered or liability incurred by acting hereunder. I hereby ratify tten instruction and any telephone instructions given pursuant to-this authorization and agree that neither the Trust elity Brokerage Services LLC will be liable for any loss, liability, cost, or expense for acting upon such instructions. I agree to the tape-recording of any phone instructions. I understand that if the 529 plan account for the original benwas established under a Uniform Gifts to Minors Act or Uniform Transfers to Minors Act (UGMA/UTMA), the assets to the minor/beneficiary and can only be used for the benefit of the minor/beneficiary and the beneficiary on such unt may not be changed. I agree to adopt and be bound by the terms and conditions of the Customer Agreement, ation Agreement and Account Application as are currently in effect and as may be amended from time to time.
AUTHO	RIZED SIGNATURE OF PARTICIPANT/TRUSTEE Date



Smart move®